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| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b><br><b>FY 2009</b><br><i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i> |  | Docket Number (Optional)<br>0756-0124P                       |  |
| Application Number                      10/790,746-Conf. #2900  |  | Filed    March 3, 2004 |  |
| For      FUNCTIONAL VITAMIN D DERIVATIVES AND METHOD OF DETERMINING 25-HYDROXY- AND 1ALPHA,25-DIHYDROXY-VITAMIN D   |  |  |  |
| Art Unit                      1641  |  | Examiner                                  S. Haq             |  |

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

|  | <u>Fee</u> | <u>Small Entity Fee</u> |                  |
|--|------------|-------------------------|------------------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))               | \$130      | \$65                    | \$ _____         |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))              | \$490      | \$245                   | \$ _____         |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1110     | \$555                   | \$ <u>555.00</u> |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))             | \$1730     | \$865                   | \$ _____         |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))             | \$2350     | \$1175                  | \$ _____         |

☒ Applicant claims small entity status. See 37 CFR 1.27.

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-2448.

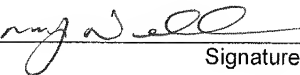
**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record. Registration Number 36,623

☐ attorney or agent under 37 CFR 1.34.  
Registration number if acting under 37 CFR 1.34 \_\_\_\_\_

  
\_\_\_\_\_  
Signature  
  
Mark J. Nuell  
\_\_\_\_\_  
Typed or printed name

August 5, 2009  
\_\_\_\_\_  
Date

(858) 356-5959  
\_\_\_\_\_  
Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of 1 forms are submitted.